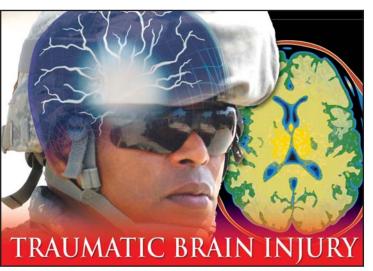
## **Center houses experts in military traumatic brain injury**

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(Author's note: This second article in a series of three explains the increased emphasis on screening for TBIs in theater and upon return, the work being done at the Defense Veterans Brain Injury Center to address TBIs and the research the center is undertaking to better diagnose and treat these injuries. See APG News dated July 5 for the first article in the series.)

Although traumatic brain injury seems to be a relatively new concept in the mainstream media, a team of pros have



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been studying it closely for the military for more than 15 years.

The Defense and Veterans Brain Injury Center, headquartered at Walter Reed Army Medical Center, was created in 1992 after the first Gulf War to learn more about head injuries in the military.

"We didn't know if TBI was an issue in Vietnam or the Gulf War because we

weren't looking for it and we weren't methodically evaluating patients," said Kathy Helmick, acting deputy director of Clinical and Educational Affairs and Manager of the Office of Clinical Standards for the DVBIC. "We are highly suspicious that things like shell shock from World War II and some post traumatic stress complaints could have been closed mild brain injuries."

With a staff of military, civilians and contractors, the DVBIC treats patients with mild, moderate and severe TBI, develops guidelines for care, gathers data on the prevalence of TBI in the Army and conducts research to help future patients. Three of the center's sites are located at military treatment facilities, four are at Veterans Affairs medical centers and two are private, contracted sites to assist with rehabilitation and community re-entry continuum of care.

The center's staff is multidisciplinary. Physician assistants, case managers, research coordinators, physiatrists, neuropsychologists, neurologists, medical and rehabilitative medicine doctors, physical therapists, occupational therapists and speech therapists all keep the center running. Helmick said TBI doesn't fit nicely into one medical specialty nor are people specifically trained in it, so the staff also trains and consults with non-DVBIC sites interested in providing care for patients with TBIs.

"It's sort of one of those things you learn on the job. It's not like you have a course on traumatic brain injury in any curriculum," she said.

The military's knowledge in the TBI arena, especially with mild TBI, grew exponentially in the past decade with the increased attention on sports concussions.

"People who keep getting knocked out and hit in the context of football and hockey, that's where we have the most scientifically sound and rigorous data," Helmick said.

Concussion is generally synonymous with a traumatic brain injury, said Dr. Deborah Warden, director of the DVBIC.

"Concussion is well known by people because we talk about sports concussion," Warden See TBI, page 5